

## SS – Mental Health of HCW meeting

Date: 17/08/2020

Location: Zoom

Davide: We have used the protocol development tool for other protocols in SS WG and other WGs – we can use this tool for this protocol at some point

Priya: We have put this protocol together looking at several different points such as depression, anxiety, fear, stigma. We would like to do it as a mixed method study. We have put together the background, aims and objectives etc but it is all subject to change. We could maybe add ‘Mixed Methods Study’ in the title?

Nicole: Maybe say ‘front line workers’ instead of listing specific jobs in the study population section

Nicole: Could we merge the 6 data collection tools into 1 data collection tool instead of giving each person 6?

Priya: Yes, that is the plan

Davide: This is very interesting and broad, but i

Vina: should we take out the stigma and discrimination?

Nicole: I think that stigma and discrimination are important as they often cause the depression and anxiety – could we go further back to the overarching aim – ‘to understand’: an exploratory study trying to understand/explore... We do the questionnaires then do interviews to understand the questionnaire’s results? This would be more explanatory

Priya: Without using the quanti we could just do exploratory?

Nicole: We could even do Quali-Quanti-Quali?

Priya: We have decided to use mixed methods to get the most data – this field is not explored very much at all

Davide: Shrinking this down with an initial round of qualitative then focussing on the outcomes of this we could come up with a quantitative questionnaire, then qualitative interviews to analyse the quanti further.

Priya: Quali as in depth phase – Focus Group Discussions

Nicole: Yes, FGD’s with doctors/nurses/lab staff etc – try to identify the differences between these groups then maybe we would end up using different follow up questionnaires for different groups

Davide: The protocol is a template, so having different tools (the 6 DCT’s) is good – people conducting the research could use different DCTs following the first round of quali.

Priya: Phase 1 = FGDs, phase 2 = quanti questionnaires, phase 3 will involve interviews

Vina: Priya and I could run phase 1 in our different settings (M/Bangalore) to see what kind of things comes up.

Nicole: We want to ensure no overlap with the HS KAP protocol – either one and the other with no overlap, or merge them into 1 big study

Vina: Is there a timeline?

Nicole: We will hear about the grant at the start of September, and we will have 18 months to run the studies

Nicole: The other SS protocols: first drafts written, presented them on a call, put them on the tool.  
HS protocols: First gathered lots of comments then wrote the draft then uploaded it onto the tool.  
Which would you prefer?

Vina: Group call with Festus, Saumu etc. Call on the 28<sup>th</sup>? I have my PhD defence on the 26<sup>th</sup>

Davide: It may be useful to circulate the draft a few days before the call to the others – then you can present it and they can comment etc. After 1 week/10 days after the call it can be presented to the larger group

Priya: Next Monday (24<sup>th</sup> August)?

Nicole: Out of the office from Friday, but Davide and Jamie will be around. Maybe we could also present to the HS group for their feedback?

Priya: yes that works. If Nicole and Davide could check that the changes we make are suitable

Nicole: Should we invite the psychiatrist who wrote the HS protocol (**Julio Canario from Dominican Republic**) to the meeting on the 28<sup>th</sup>?

Priya/Vina: yes, that sounds good